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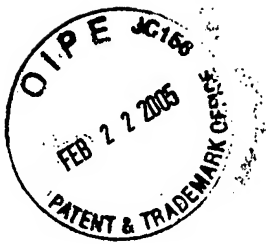
<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/673,089	
	Filing Date	9/26/2003	
	First Named Inventor	Burak Acar	
	Art Unit	3676	
	Examiner Name	Not Yet Assigned	
Total Number of Pages in This Submission	4	Attorney Docket Number	S01-253/US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Correction Request Copy of Filing Receipt
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<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>		
Firm or Individual name	Ron Jacobs Reg. No. 50,142	
Signature		
Date	2-14-05	

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Attorney Docket: **S01-253/US**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application Number: 10/673,089  
Filing Date: 9/26/2003  
Applicant: Burak Acar  
Application Title: Method for Matching and Registering  
Medical Image Data  
Examiner: Not assigned  
Art Unit: 3676

**CORRECTION REQUEST**

Commissioner for Patents  
P.O. Box 1450, Alexandria, VA 22313-1450


Dear Sir:

Kindly correct the inventor, Burak Acar's residential city.

The filing receipt reads: Bebek, Turkey. This should be changed to read **Istanbul, Turkey.**

A marked-up version of the Filing Receipt is enclosed for your reference.

Very respectfully,

  
Ron Jacobs  
(Reg. No. 50,142)



## UNITED STATES PATENT AND TRADEMARK OFFICE

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APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/673,089	09/26/2003	3676	450	S01-253/US	5	13	2

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UPDATED FILING RECEIPT



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Date Mailed: 04/09/2004

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## Applicant(s)

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## Domestic Priority data as claimed by applicant

This appln claims benefit of 60/414,104 09/27/2002

## Foreign Applications

If Required, Foreign Filing License Granted: 01/02/2004

Projected Publication Date: 07/15/2004

Non-Publication Request: No

Early Publication Request: No

\*\* SMALL ENTITY \*\*

Title

Method for matching and registering medical image data

**Preliminary Class**

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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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